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TRANSMITTAL FORM


(to be used for all correspondence after initial filing)

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| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/629,476 | |
| | Filing Date | 07/30/2003 | |
| | First Named Inventor | Venanzio Cardarelli | |
| | Group Art Unit | 2859 | |
| | Examiner Name | Amanda J. Hoolahan | |
| Total Number of Pages in This Submission | 10 | Attorney Docket No. | 1255.21 |

ENCLOSURES (check all that apply)


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|--|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Petition |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Request for Refund |
| <input type="checkbox"/> Affidavit(s) / Declaration(s) | <input type="checkbox"/> After Allowance Communication |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Response to Missing Parts / Incomplete Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Assignment Papers (for an Application) | Remarks |
| <input checked="" type="checkbox"/> Drawing(s) | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | | |
|-----------|---|-----------------------------------|--------------|
| Name | D. MICHAEL BURNS | Registration No. (Attorney/Agent) | 38,400 |
| Address | 37-6 Belmont Court, Brockton, MA 02301 | Telephone | 508-583-7872 |
| Signature |  | Date | July 7, 2004 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop – AMENDMENT, Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 on this date: July 7, 2004

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|-----------|---|------|--------------|
| Name | D. MICHAEL BURNS | | |
| Signature |  | Date | July 7, 2004 |